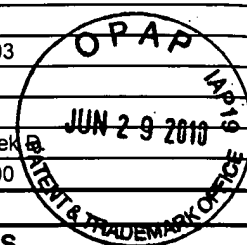


IDS Form PTO/SB/08: Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known		
				Application Number		10/634,893
				Filing Date		August 6, 2003
				First Named Inventor		Mitzi R. HAIL
				Art Unit		3686
				Examiner Name		Koppikar, Vivek
Sheet	1	of	2	Attorney Docket Number		08324.0004-00



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Examiner Initials	Cite No.	Document Number	Issue or Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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		Country Code Number Kind Code (if known)				
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Examiner Signature	Date Considered
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.